

Heart failure treatment options have come a long way

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This year the Heart Failure Congress 2011, organised by the Heart Failure Association of the European Society of Cardiology (ESC), offers a strong scientific programme featuring 11 late breaking trials and clinical updates, over 1000 original abstracts (submitted by delegates from 61 countries), 14 industry sponsored satellites and mini satellites and over 70 separate sessions.

"The presentations will demonstrate the fantastic improvements we've seen in both treatment options for heart failure and understanding of the mechanisms behind the disease. The field has come an awfully long way since the ESC first started holding dedicated heart failure meetings in 1995," said Professor Karl Swedberg, Scientific Chairperson of the Congress programme.

Highlights of the late breaking trials and clinical updates programme will include the SHIFT trial with ivadabine, EMPHASIS-HF with eplerenone, an update on the MADIT CRT trial on how to predict optimal benefits from CRT, Northstar, and two [telemonitoring](#) trials - The TEHAF study and TIM-HF.

"The Heart Failure Congress, which represents the largest meeting on heart failure in the world, offers the opportunity for everyone in the heart failure community to come together. It will help get delegates up to speed on the core topics and associated technologies that they need in their daily clinical practice," said Professor Piotr Ponikowski, President of the Heart Failure Association.

Delegates attending the Heart Failure meeting, which expects to attract around 2500 attendees, will include cardiologists, internists, general physicians, basic scientists, epidemiologists, nurses, and industry affiliates.

The overall theme of the congress will be co-morbidities, with sessions focusing on heart failure and diabetes, [lung disease](#), renal impairment, [hypertension](#), cancer, cardio-renal syndrome and anaemia. "More and more patients with heart failure are suffering from co-morbidities. The problem heart failure clinicians face on a daily basis is how best to integrate the different medications and approaches to treatments," said Swedberg.

Other important topics that will be covered in depth are devices and technologies, including ICDs, CRT and LVAD, with sessions exploring how to apply the new findings in clinical practice.

One event likely to attract high attendance is an over view of the Surgical Treatment for Ischemic Heart Failure (STICH) trial, which will be presented by Christopher O'Connor (Durham, US) in a debate session at 14.15 on Monday in the Stockholm Lecture Room. The STICH trial, comparing CABG therapy and medical therapy in patients with left ventricular ejection fractions less than 35%, was first presented at the American College of Cardiology meeting in April. "This session will provide a good opportunity for delegates to get to grips with how to interpret the results of this really important trial, with opportunities to ask the presenters questions," said Swedberg.

A highlight on Saturday will be the presidential debate that is being held as a joint session with the Heart Failure Society of America, to explore two controversial issues in heart failure treatment. One debate will feature whether ICDs are being over used in Europe, and the other will explore the controversy over whether heart rate reduction beyond beta

blockers is effective in heart failure. Other joint sessions that will be held include Imaging heart failure, with the European Association of Echocardiography on Saturday, and the impact of new atrial fibrillation guidelines on heart failure management on Sunday with the European Heart Rhythm Association (EHRA).

For the first time the meeting will not offer a dedicated nursing tract. "This was a conscious decision because we want to emphasize the team spirit that goes on in the management of heart failure patients. The work of physicians and nurses in heart failure should be properly integrated," explained Swedberg. Sessions that may be of particular interest to nurses will include palliative care for patients with end-stage heart failure, and how to talk to your patients.

In the opening ceremony a life time achievement award will be presented for the first time to Professor John Kjekshus, from the University of Oslo, Norway, who over the past 40 years has been involved in many trials in the development of treatments for heart failure, including the TIMOLOL trial, CONSENSUS trial, the 4 S trial, the MERIT trial and the CORONA trial.

To recognise the contribution of young researchers the [Heart Failure Association Board](#) are inviting delegates under 35 years to a special reception with faculty members that will be held on Monday evening.

"We want to emphasise the importance that we place on young researchers because they represent our new blood," said Ponikowski.

"The idea is to provide them with a clear picture of our aims, mission and on-going initiatives in the hope that we can inspire them to get more involved."

On Sunday a poster session providing updates from industry on the latest ongoing trials will be co chaired by John McMurray (Glasgow, GB) and Stefan Anker (Berlin, DE). "The objective is to provide industry with an

opportunity to present their ongoing trials and the audience to ask questions. It will be a real opportunity for delegates to get a feel for what's in the pipeline," said Ponikowski.

The city of Gothenburg provides an ideal venue for the congress. "The many advantages include close proximity between hotels and the congress centre, together with many cultural and social attractions " said Swedberg, adding that the closeness to the sea makes Gothenburg particularly special with a half-hour tram ride taking you straight into the southern archipelago.

Provided by European Society of Cardiology

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